

CHAMP ACT INCREASES ACCESS TO HEALTHCARE TO UNDERSERVED COMMUNITIES

Whether urban or rural, children in many areas of the country have difficulty securing access to needed healthcare. Despite SCHIP's success in covering children, 17 percent of children living in rural areas remain uninsured, while 19 percent of children in urban areas remain uninsured. The CHAMP Act takes important steps to address this problem:

- Establishes new outreach tools (express lane eligibility) coupled with financial incentives to reach eligible but un-enrolled children and will help ensure that more urban and rural children are enrolled in coverage.
- Eliminates burdensome documentation requirements for children. This will help rural children, who otherwise most often travel great distances to State offices to present eligibility paperwork.
- Improves access to coverage for Native Americans by adding Indian enrollment cards to the list of acceptable documentation.
- Requires the Secretary of the Department of Health and Human Services to include measures that examine access to care in underserved areas as part of implementing the new pediatric health quality measurement program.
- The new CHIP and Medicaid access and payment commission (CAPE), will evaluate access to care through SCHIP and Medicaid in rural and underserved areas and make recommendations to Congress for improvement.
- Outreach procedures will apply to all children and pregnant women.
- Clarifies school clinic services are covered under CHIP, increasing avenues for underserved children to access care.
- Requires Federally-qualified health clinics and rural health clinics to be covered under CHIP. Federally-qualified health clinics currently serve as a healthcare home and family doctor to more than 5 million children, over 350,000 of who are enrolled in CHIP.
- Expands agencies that can determine pregnant women presumptively eligible for coverage, increasing opportunities to find and enroll pregnant women for care in underserved communities.
- Increases funding for culturally-appropriate enrollment and retention activities, increasing access for children in underserved communities.